

APPENDIX 13

INSPECTION REPORT

SELF PROPELLED WELL SERVICE AND DRILL UNITS

DEPARTMENT OF TRANSPORTATION
SELF-PROPELLED WELL SERVICE AND DRILL UNITS INSPECTION REPORT
DM-M-P-20 (4/82)

Permit No. _____

Company Name (Lessee or Owner)	() Phone	Inspection Type: <input type="checkbox"/> Initial <input type="checkbox"/> Renewal	Inspection Date
Company Address and Zip	Company Name, Last Inspection		Date of Last Inspection

GENERAL VEHICLE DATA

Make	Serial No.	License No.	Company No.	Fuel Level: _____ %	Vehicle Type: <input type="checkbox"/> Drive In <input type="checkbox"/> Back In
Front Outriggers: <input type="checkbox"/> Removed <input type="checkbox"/> Attach.	Rear Outriggers: <input type="checkbox"/> Removed <input type="checkbox"/> Attach.	Front Tires: Size _____ : Load Range _____		Rear Tires: Size _____ : Load Range _____	

WIDTH AND HEIGHT DATA

Max. Height: _____ FT. _____ IN.	1/ Max. Width (Include all projections except lights, mirrors, & equipment defined in VC 35110): _____ FT. _____ IN.
2/ Max. Width Measured at Tire Bulge: _____ FT. _____ IN.	Max. Width (Include all projections except mirrors): _____ FT. _____ IN.

VEHICLE CONFIGURATION

Vehicle Length: _____ FT. _____ IN.	Overall Length Including Mast: _____ FT. _____ IN.	SAND LINE Dia: _____ IN. Length _____ FT.			DRILL LINE Dia: _____ IN. Length _____ FT.				
AXLE NUMBER	1	2	3	4	5	6	7	8	9
NO. OF TIRES									
AXLE SPACING									
AXLE WIDTH									
SCALE WEIGHT									

Operating Components Removed for Weighing:

1. _____	4. _____	7. _____
2. _____	5. _____	8. _____
3. _____	6. _____	9. _____

MAST INFORMATION

Mast Length: <input type="checkbox"/> Lattice _____ FT. From Foot Pin to Sheave Pin <input type="checkbox"/> Hydraulic _____ FT.			
FRONT MAST OVERHANG	Front of Tires to Tip: _____ FT.	Front of Bumper to Tip: _____ FT.	Block Size: _____ (Tons)
REAR MAST OVERHANG	From \odot Rear Carrier Axle to Tip: _____ FT.		
BLOCK POSITION	\odot Rear Axle to Sheave Pin of Block: _____ FT.		

PERMIT DATA (Permit Office Use Only)

Inspection Location			
Permit Classification:	<input type="checkbox"/> Single Trip Only	<input type="checkbox"/> Annual	<input type="checkbox"/> Rejected
Routing Weight Class:	<input type="checkbox"/> Green	<input type="checkbox"/> Purple	
Tire Ratings Limit Permitted Weights:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
CALTRANS OR CHP REPRESENTATIVE ►			Title
AUTHORIZED COMPANY REPRESENTATIVE ►			Title

NOTES